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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 1991-174

First Named Inventor DONALD J. GJERDINGEN

COMPLETE IF KNOWN

Application Number /

Filing Date March 16, 2001

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ROTARY INCUBATION STATION FOR IMMUNOASSAY SYSTEMS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231

DECLARATION — Utility or Design Patent Application

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or Bar Code Label

22471

OR ☐

Correspondence address below

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Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :☐ A petition has been filed for this unsigned inventor

Given Name

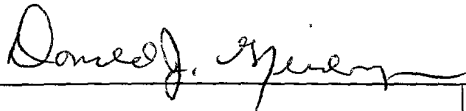
(first and middle (if any))

DONALD J.

Family Name

or Surname

GJERDINGEN

Inventor's
Signature3-14-2001
Date

Residence: City MAYER

State MN

Country USA

Citizenship USA

Mailing Address 5950 TACOMA AVENUE

Mailing Address

City MAYER

State MN

ZIP 55360

Country USA

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name

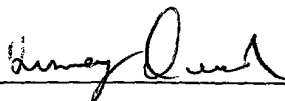
(first and middle (if any))

HUMAYUN

Family Name

or Surname

QURESHI

Inventor's
Signature

Date 3/14/01

Residence: City EDEN PRAIRIE

State MN

Country USA

Citizenship USA

Mailing Address 18634 SCHROERS FARM RD.

Mailing Address

City EDEN PRAIRIE

State MN

ZIP 55347

Country USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PETER G.		WERNESSE	
Inventor's Signature <i>Peter G. Werness</i>		Date 3/14/01	
Residence: City	CARVER	State	MN
Country	USA	Citizenship	USA
Mailing Address 5855 COUNTY ROAD 50			
Mailing Address			
City	CARVER	State	MN
ZIP	55315	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
BRIAN D.		WILSON	
Inventor's Signature <i>Brian D. Wilson</i>		Date 3/14/01	
Residence: City	CHASKA	State	MN
Country	USA	Citizenship	USA
Mailing Address 659 WOODRIDGE DR. N.			
Mailing Address			
City	CHASKA	State	MN
ZIP	55318	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
MARK J.		KITTOCK	
Inventor's Signature <i>Mark J. Kittock</i>		Date 3/14/01	
Residence: City	EDEN PRAIRIE	State	MN
Country	USA	Citizenship	USA
Mailing Address 8127 CURRANT PLACE			
Mailing Address			
City	EDEN PRAIRIE	State	MN
ZIP	55347	Country	USA

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	DONALD J. GJERDINGEN
Group Art Unit	
Examiner Name	
Attorney Docket Number	1991-174

I hereby appoint:

☒ Practitioners at Customer Number

22471

OR

☐ Practitioner(s) named below:



Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name DONALD J. GJERDINGEN

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 5 forms are submitted.

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PTO/SB/81 (10-00)

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SIGNATURE of Applicant or Assignee of Record

Name

MARK J. KITTOCK

Signature

[Handwritten Signature]
 3/14/01

Date

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SIGNATURE of Applicant or Assignee of Record

Name HUMAYUN QURESHI


Signature

Date

3/14/01

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SIGNATURE of Applicant or Assignee of Record

Name

PETER G. WERNES

Signature

Peter G. Wernes

Date

3/14/01

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SIGNATURE of Applicant or Assignee of Record

Name

BRIAN D. WILSON

Signature

Date

Brian D. Wilson
 3/14/01

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